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FORM PTO-1449 INFORMATION DISCLOSURE STATEMENT A A MAY 1 8 2010			ATTY DOCKET NO. 944-001.090-1	SERIAL NO. 10/659,774		
			APPLICANTS: Haverinen et al.			
			FILING DATE: September 10, 2003	ART UNIT: 2452		
UNITED STATES PATENT DOCUMENTS EVANA DOCUMENT						
EXAM. INITIAL	DOCUMENT NUMBER	DATE	INVENTOR/ASSIGNEE	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
FOREIGN PATENT DOCUMENTS						
	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES/NO
OTHER DOCUMENTS (INCLUDING AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.)						
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Examiner Thomas J. Daigle			Date:			